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**HB 5527 – An Act Concerning a Working Group to Study Health Care Reform**

**Testimony of Joe Pandolfo, Public Health Committee Public Hearing March 21<sup>st</sup>, 2012**

Dear Representative Ritter, Senator Gerratana, and Members of the Committee:

I'm writing as a citizen, and member of the Legislature's 2010 Sustinet Preventive Care Advisory Committee. I've lived in Connecticut since childhood, raised my own family here, and have spent my entire academic and professional life in the state, intending to retire here. Having received, and studied the significant benefits of acupuncture and Oriental medicine, I've also served in recent years as a public advocate in the state for that branch of medicine.

I want to thank you for raising HB 5527 – An Act Concerning a Working Group to Study Health Care Reform. This bill deserves the Committee's approval, and full support on the House and Senate floors.

The recommendations generated by the bill would certainly make our health care system in Connecticut more efficient for payers and more effective for patients. In fact by focusing on community health, wellness initiatives, health delivery alternatives and chronic disease care, the bill touches on exactly the elements that can help us transition from a worn out 'sick care' system to a more vital health care system.

To highlight just one example of the innovations within reach: The Centers for Disease Control, in alignment with the American and British Geriatric Societies, recently endorsed a community based fall prevention exercise program for seniors, which uses a defined tai chi protocol in the group class setting. This accessible, affordable, not to mention sociable program has been shown in studies to help reduce falls among participants by rates of up to forty-nine percent (see references to Wolfe, et al. 1996, Li, et al. 2008, Logghe, et al. 2010 and related studies, attached). A remarkable, and potentially valuable result, given that our own state health statistics show 2005-2006 hospital stay costs of \$273 million (not including long-term care or rehabilitation costs) due to falls among older adults.

By studying, consolidating and making recommendations on programs like these, the working group established by this bill would provide a tremendous resource. The costs of our health system would certainly be reduced, and the health of our citizens would be improved.

Thank you for your consideration of public comments on this bill, and for all your good work to improve public health and health information in our state.

cc: Senate President Pro Tempore Donald Williams  
Representative Gregory Haddad

**Reference:**  
**Tai Chi Fall Prevention Studies**

Study	Participants	Intervention	Results
Wolf, et al. (1996)	Community-dwelling older adults; age 70 and older	<ul style="list-style-type: none"> <li>• 10 simplified forms.</li> <li>• Participants practiced twice a week for 15 weeks.</li> </ul>	<ul style="list-style-type: none"> <li>• The fall rate was 47.5 percent lower for Tai chi participants than for the exercise comparison group at the four-month follow-up.</li> <li>• Tai chi participants experienced a reduced fear of falling, and lower average blood pressure than the exercise comparison group.</li> </ul>
Li, et al. (2005)	Community-dwelling adults, age 70–92	<ul style="list-style-type: none"> <li>• Participants attended class three times a week for six months.</li> </ul>	<ul style="list-style-type: none"> <li>• Tai chi participants experienced significantly fewer falls and injurious falls compared with a control group that did stretching exercises at the end of a six-month period.</li> <li>• Tai chi participants showed significant improvements in all measures of functional balance and physical performance, and had reduced fear of falling as compared to the control group. <ul style="list-style-type: none"> <li>- These improvements were maintained for at least six months after the intervention ended.</li> </ul> </li> </ul>
Logghe, et al. (2010)	Community-dwelling older adults	<ul style="list-style-type: none"> <li>• Meta-analysis of 15 trials.</li> <li>• Three trials included two Tai chi groups and one non-Tai chi group.</li> <li>• Two-arm trials (n=7) used a non-exercise control intervention and five used an exercise control group.</li> <li>• Dose of Tai chi exercise ranged from 16 to 120 hours.</li> </ul>	<ul style="list-style-type: none"> <li>• Tai chi participants experienced 21 percent fewer falls compared to non-exercise controls.</li> <li>• Tai chi participants experienced 49 percent fewer falls compared to controls in low-intensity exercise programs.</li> </ul>

Source:

U.S. Centers for Disease Control, National Center for Injury Prevention and Control  
*"Tai Chi: Moving for Better Balance – A Guide for Program Implementation"*

[http://api.ning.com/files/lpWX79eu\\*NgqhrxYqum3lrPom6Dp4GRQCK9JlqwtJyISBPaj2W38NVNJNcBqszLkRpIWB9ee-lwV4PIN-hUoPujtn\\*zU9vRw/TCManual\\_Compiled\\_v19.pdf](http://api.ning.com/files/lpWX79eu*NgqhrxYqum3lrPom6Dp4GRQCK9JlqwtJyISBPaj2W38NVNJNcBqszLkRpIWB9ee-lwV4PIN-hUoPujtn*zU9vRw/TCManual_Compiled_v19.pdf)

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